

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>FEE DETERMINATION</b>			
<b>O.I.P.E. CLASSIFIER</b>			3/10
<b>FORMALITY REVIEW</b>	QB 10	82784	4-30-98

~~10550~~  
**INDEX OF CLAIMS**

10-2-98

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
— (Through numeral)	Canceled	A	Appeal
÷	Restricted	O	Objected

Claim		Date
Final		
Original		
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Claim	Data
Final Original	
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If more than 150 claims or 10 actions  
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